

BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

LEONARD A. JASINSKI, M.D.

License No. 15505
For the Practice of Allopathic Medicine
In the State of Arizona.

Case No. MD-09-0625A

**ORDER FOR LETTER OF REPRIMAND
AND PROBATION AND CONSENT TO
SAME**

Leonard A. Jasinski, M.D. ("Respondent") elects to permanently waive any right to a hearing and appeal with respect to this Order for Letter of Reprimand and Probation; admits the jurisdiction of the Arizona Medical Board ("Board"); and consents to the entry of this Order by the Board.

FINDINGS OF FACT

1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.

2. Respondent is the holder of license number 15505 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-09-0625A after receiving a complaint regarding Respondent's inappropriate prescribing to his stepson ("JC") and LD.

4. On May 26, 2009, Respondent met with the Board's Addiction Medicine Consultant (AMC) and reported using some of the Percocet he prescribed to JC and LD for himself. Respondent underwent a hair drug test, which was positive for Opiates including Hydrocodone and Oxycodone. The AMC opined that Respondent suffered from opioid dependence, was unsafe to practice, and required inpatient substance abuse treatment. On May 29, 2009, Respondent entered inpatient treatment. On July 2, 2009, Respondent was discharged from treatment with several diagnoses that included Opioid Dependence. The recommendations from the treatment facility included enrolling in the Board's Monitored Aftercare Program (MAP) and continuation in attending 12-step

1 meetings. On July 9, 2009, Respondent entered into an Interim Consent Agreement to
2 participate in MAP.

3 5. During the Board's investigation, a pharmacy survey was obtained that
4 showed that Respondent wrote frequent, multiple and duplicate prescriptions for Percocet
5 and Oxycodone for JC and LD. There was no documented therapeutic purpose for the
6 medications. In response to the Board's investigation, Respondent admitted that although
7 the prescriptions were written for JC and LD, the primary purpose for writing the Percocet
8 was to obtain it for his own use. Respondent also admitted to sharing some of the
9 Percocet with JC. Additionally, Respondent prescribed Tylenol to himself and JC that was
10 above the recommended daily dosage limit. Respondent admitted that he did not have
11 medical records for JC and LD and that he did not establish a provider-patient relationship
12 with them prior to prescribing the medications.

13 6. The standard of care requires a physician to be aware of the potential for
14 Tylenol toxicity and to limit Tylenol-containing prescriptions to the recommended dosage
15 amount of less than 4000mg of Tylenol daily.

16 7. Respondent deviated from the standard of care because he was not aware
17 of the potential for Tylenol toxicity to JC and he did not limit the dosages of Tylenol to the
18 recommended daily doses.

19 8. JC was reported to have a prior history of opiate dependence, and
20 Respondent's prescribing may have exacerbated this problem and may have prevented
21 him from obtaining appropriate medical treatment and intervention. JC and Respondent
22 were both at risk for Tylenol toxicity, and Respondent's elevated liver function test may
23 have been related to his prior excessive Tylenol intake.

24 9. A physician is required to maintain adequate legible medical records
25 containing, at a minimum, sufficient information to identify the patient, support the

1 diagnosis, justify the treatment, accurately document the results, indicate advice and
2 cautionary warnings provided to the patient and provide sufficient information for another
3 practitioner to assume continuity of the patient's care at any point in the course of
4 treatment. A.R.S. § 32-1401(2). Respondent's records were inadequate because he did
5 not have medical records for JC and LD.

6 CONCLUSIONS OF LAW

7 1. The Board possesses jurisdiction over the subject matter hereof and over
8 Respondent.

9 2. The conduct and circumstances described above constitute unprofessional
10 conduct pursuant to A.R.S. § 32-1401(27)(e) ("[f]ailing or refusing to maintain adequate
11 records on a patient."), A.R.S. § 32-1401(27)(f) ("[h]abitual intemperance in the use of
12 alcohol or habitual substance abuse.), A.R.S. § 32-1401(27)(g) ("[u]sing controlled
13 substances except if prescribed by another physician for use during a prescribed course of
14 treatment.), A.R.S. § 32-1401(27)(h) ("[p]rescribing or dispensing controlled substance to
15 members of the physician's immediate family.), A.R.S. § 32-1401(27)(j) ("[p]rescribing,
16 dispensing or administering any controlled substance or prescription-only drug for other
17 than accepted therapeutic purposes.), A.R.S. § 32-1401(27)(q) ("[a]ny conduct or practice
18 that is or might be harmful or dangerous to the health of the patient or the public.") and
19 A.R.S. § 32-1401(27)(ss) ("[p]rescribing, dispensing or furnishing a prescription medication
20 or a prescription-only device as defined in section 32-1901 to a person unless the licensee
21 first conducts a physical examination of that person or has previously established a doctor-
22 patient relationship. . . .").

ORDER

IT IS HEREBY ORDERED THAT:

1. Respondent is issued a Letter of Reprimand.

2. Respondent is placed on Probation for **five years** with the following terms and conditions:

a. Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all conditions of probation. The declarations shall be submitted on or before the 15th of March, June, September and December of each year, beginning on or before March, 2010.

b.1. **Participation**¹. Respondent shall promptly enroll in and participate in the Board's program for the treatment and rehabilitation of physicians who are impaired by alcohol or drug abuse ("MAP"). Respondent's participation in MAP may be unilaterally terminated with or without cause at the Board's discretion at any time after the issuance of this Order.

2. **Relapse Prevention Group**. Respondent shall attend MAP's relapse prevention group therapy sessions one time per week for the duration of this Order, unless excused by the MAP relapse prevention group facilitator for good cause such as illness or vacation. Respondent shall instruct the MAP relapse prevention group facilitators to release to Board Staff, upon request, all records relating to Respondent's treatment, and to submit monthly reports to Board Staff regarding attendance and progress. The reports shall be submitted on or before the 10th day of each month.

3. **12 Step or Self-Help Group Meetings**. Respondent shall attend

¹ Respondent's MAP participation is retroactive to July 9, 2009.

1 ninety 12-step meetings or other self-help group meetings appropriate for substance
2 abuse and approved by Board Staff, for a period of ninety days beginning not later than
3 either (a) the first day following Respondent's discharge from chemical dependency
4 treatment or (b) the date of this Order.

5 4. Following completion of the ninety meetings in ninety days,
6 Respondent shall participate in a 12-step recovery program or other self-help program
7 appropriate for substance abuse as recommended by the MAP Director and approved by
8 Board Staff. Respondent shall attend a minimum of three 12-step or other self-help
9 program meetings per week for a total of twelve per month. Two of the twelve meetings
10 must be Caduceus meetings. Respondent must maintain a log of all self-help meetings.
11 Board Staff will provide the log to Respondent.

12 5. Board-Staff Approved Primary Care Physician. Respondent shall
13 promptly obtain a primary care physician and shall submit the name of the physician to
14 Board Staff in writing for approval. The Board-approved primary care physician ("PCP")
15 shall be in charge of providing and coordinating Respondent's medical care and treatment.
16 Except in an *Emergency*, Respondent shall obtain medical care and treatment only from
17 the PCP and from health care providers to whom the PCP refers Respondent.
18 Respondent shall request that the PCP document all referrals in the medical record.
19 Respondent shall promptly inform the PCP of Respondent's rehabilitation efforts and
20 provide a copy of this Order to the PCP. Respondent shall also inform all other health care
21 providers who provide medical care or treatment that Respondent is participating in MAP.

22 a. "*Emergency*" means a serious accident or sudden illness that, if not
23 treated immediately, may result in a long-term medical problem or loss of life.

24 6. Medication. Except in an *Emergency*, Respondent shall take no
25 *Medication* unless the PCP or other health care provider to whom the PCP refers

Respondent prescribes the *Medication*. Respondent shall not self-prescribe any *Medication*.

a. "*Medication*" means a prescription-only drug, controlled substance, and over-the counter preparation, other than plain aspirin, plain ibuprofen, and plain acetaminophen.

7. If a controlled substance is prescribed, dispensed, or is administered to Respondent by any person other than PCP, Respondent shall notify the PCP in writing within 48 hours and notify the MAP Director immediately. The notification shall contain all information required for the medication log entry specified in paragraph 8. Respondent shall request that the notification be made a part of the medical record. This paragraph does not authorize Respondent to take any *Medication* other than in accordance with paragraph 6.

8. **Medication Log.** Respondent shall maintain a current legible log of all *Medication* taken by or administered to Respondent, and shall make the log available to the Board Staff upon request. For *Medication* (other than controlled substances) taken on an on-going basis, Respondent may comply with this paragraph by logging the first and last administration of the *Medication* and all changes in dosage or frequency. The log, at a minimum, shall include the following:

- a. Name and dosage of *Medication* taken or administered;
- b. Date taken or administered;
- c. Name of prescribing or administering physician;
- d. Reason *Medication* was prescribed or administered.

This paragraph does not authorize Respondent to take any *Medication* other than in accordance with paragraph 6.

9. **No Alcohol or Poppy Seeds.** Respondent shall not consume alcohol

1 or any food or other substance containing poppy seeds or alcohol.

2 10. **Biological Fluid Collection.** During all times that Respondent is
3 physically present in the State of Arizona and such other times as Board Staff may direct,
4 Respondent shall promptly comply with requests from Board Staff or MAP Director to
5 submit to witnessed biological fluid collection. If Respondent is directed to contact an
6 automated telephone message system to determine when to provide a specimen,
7 Respondent shall do so within the hours specified by Board Staff. For the purposes of this
8 paragraph, in the case of an in-person request, "promptly comply" means "immediately."
9 In the case of a telephonic request, "promptly comply" means that, except for good cause
10 shown, Respondent shall appear and submit to specimen collection not later than two
11 hours after telephonic notice to appear is given. The Board in its sole discretion shall
12 determine good cause.

13 11. Respondent shall provide Board Staff in writing with one telephone
14 number that shall be used to contact Respondent on a 24 hour per day/seven day per
15 week basis to submit to biological fluid collection. For the purposes of this section,
16 telephonic notice shall be deemed given at the time a message to appear is left at the
17 contact telephone number provided by Respondent. Respondent authorizes any person
18 or organization conducting tests on the collected samples to provide testing results to the
19 Board and the MAP Director.

20 12. Respondent shall cooperate with collection site personnel regarding
21 biological fluid collection. Repeated complaints from collection site personnel regarding
22 Respondent's lack of cooperation regarding collection may be grounds for termination
23 from MAP.

24 13. **Out of State Travel and/or Unavailability at Home or Office**
25 **Telephone Number.** Respondent shall provide Board Staff at least three business days

1 advance written notice of any plans to be away from office or home when such absence
2 would prohibit Respondent from responding to an order to provide a biological fluid
3 specimen or from responding to communications from the Board. The notice shall state
4 the reason for the intended absence from home or office, and shall provide a telephone
5 number that may be used to contact Respondent.

6 14. Payment for Services. Respondent shall pay for all costs,
7 including personnel and contractor costs, associated with participating in MAP at
8 time service is rendered, or within 30 days of each invoice sent to Respondent.

9 15. Examination. Respondent shall submit to mental, physical, and
10 medical competency examinations at such times and under such conditions as directed by
11 the Board to assist the Board in monitoring Respondent's ability to safely perform as a
12 physician and Respondent's compliance with the terms of this Order.

13 16. Treatment. Respondent shall submit to all medical, substance
14 abuse, and mental health care and treatment ordered by the Board.

15 17. Obey All Laws. Respondent shall obey all federal, state and local
16 laws, and all rules governing the practice of medicine in the State of Arizona.

17 18. Interviews. Respondent shall appear in person before the Board and
18 its Staff and MAP committees for interviews upon request, upon reasonable notice.

19 19. Address and Phone Changes, Notice. Respondent shall
20 immediately notify the Board in writing of any change in office or home addresses and
21 telephone numbers.

22 20. Relapse, Violation. In the event of chemical dependency relapse by
23 Respondent or Respondent's use of drugs or alcohol in violation of the Order, Respondent
24 shall promptly enter into an Interim Consent Agreement for Practice Restriction that
25 requires, among other things, that Respondent not practice medicine until such time as

Respondent successfully completes long-term inpatient or residential treatment program for chemical dependency designated by Board Staff and obtains affirmative approval from the Board or the Executive Director to return to the practice of medicine. Prior to approving Respondent's request to return to the practice of medicine, Respondent may be required to submit to witnessed biological fluid collection, undergo any combination of physical examination, psychiatric or psychological evaluation and/or successfully pass the special purpose licensing examination or the Board may conduct interviews for the purpose of assisting it in determining the ability of Respondent to safely return to the practice of medicine. In no respect shall the terms of this paragraph restrict the Board's authority to initiate and take disciplinary action for violation of this Order.

21. **Notice Requirements.**

(A) Respondent shall immediately provide a copy of this Order to all employers and all hospitals and free standing surgery centers where Respondent currently has privileges. Within 30 days of the date of this Order, Respondent shall provide the Board with a signed statement of compliance with this notification requirement. Upon any change in employer or upon the granting of privileges at additional hospitals and free standing surgery centers, Respondent shall provide the employer, hospital or free standing surgery center with a copy of this Order. Within 30 days of a change in employer or upon the granting of privileges at additional hospitals and free standing surgery centers, Respondent shall provide the Board with a signed statement of compliance with this notification requirement.

(B) Respondent is further required to notify, in writing, all employers, hospitals and free standing surgery centers where Respondent currently has or in the future gains employment or privileges, of a chemical dependency relapse, use of drugs or alcohol in violation of this Order and/or entry into a treatment program. Within seven days

1 of any of these events Respondent shall provide the Board written confirmation of
2 compliance with this notification requirement.

3 22. **Public Record.** This Order is a public record.

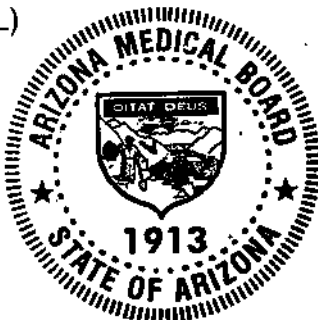
4 23. **Out-of-State.** In the event Respondent resides or practices as a
5 physician in a state other than Arizona, Respondent shall participate in the rehabilitation
6 program sponsored by that state's medical licensing authority or medical society.
7 Respondent shall cause the monitoring state's program to provide written reports to the
8 Board regarding Respondent's attendance, participation, and monitoring. The reports
9 shall be due quarterly on or before the 15th day of March, June, September, and
10 December of each year, until the Board terminates this requirement in writing. The
11 monitoring state's program and Respondent shall immediately notify the Board if
12 Respondent: a) is non-compliant with any aspect of the monitoring requirements; b)
13 relapses; c) tests positive for controlled substances; d) has low specific gravity urine drug
14 test(s), missed and/or late urine drug tests, or otherwise rejected urine drug tests; and e) is
15 required to undergo any additional treatment.

16 24. This Order supersedes all previous consent agreements and
17 stipulations between the Board and/or the Executive Director and Respondent.

18 25. The Board retains jurisdiction and may initiate new action based upon
19 any violation of this Order.

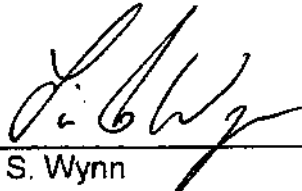
20 DATED AND EFFECTIVE this 11TH day of FEBRUARY, 2009.

21
22 (SEAL)



ARIZONA MEDICAL BOARD

By



Lisa S. Wynn
Executive Director

CONSENT TO ENTRY OF ORDER

1. Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Order"). Respondent acknowledges he has the right to consult with legal counsel regarding this matter.

2. Respondent acknowledges and agrees that this Order is entered into freely and voluntarily and that no promise was made or coercion used to induce such entry.

3. By consenting to this Order, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Order in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Order.

4. The Order is not effective until approved by the Board and signed by its Executive Director.

5. All admissions made by Respondent are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, said admissions by Respondent are not intended or made for any other use, such as in the context of another state or federal government regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or any other state or federal court.

6. Upon signing this agreement, and returning this document (or a copy thereof) to the Board's Executive Director, Respondent may not revoke the consent to the entry of the Order. Respondent may not make any modifications to the document. Any modifications to this original document are ineffective and void unless mutually approved by the parties.

1 7. This Order is a public record that will be publicly disseminated as a formal
2 disciplinary action of the Board and will be reported to the National Practitioner's Data
3 Bank and on the Board's web site as a disciplinary action.

4 8. If any part of the Order is later declared void or otherwise unenforceable, the
5 remainder of the Order in its entirety shall remain in force and effect.

6 9. If the Board does not adopt this Order, Respondent will not assert as a
7 defense that the Board's consideration of the Order constitutes bias, prejudice,
8 prejudgment or other similar defense.

9 10. Any violation of this Order constitutes unprofessional conduct and may result
10 in disciplinary action. A.R.S. § § 32-1401(27)(r) ("[v]iolating a formal order, probation,
11 consent agreement or stipulation issued or entered into by the board or its executive
12 director under this chapter") and 32-1451.

13 11. ***Respondent has read and understands the conditions of probation.***

14 Leonard A. Jasinski, M.D.
15 LEONARD A. JASINSKI, M.D.
16

DATED: 12/03/09

17 EXECUTED COPY of the foregoing mailed
18 this 17th day of February 2009 to:

19 Leonard A. Jasinski, M.D.
20 Address of Record

21 ORIGINAL of the foregoing filed
22 this 17th day of February 2009 with:

23 Arizona Medical Board
24 9545 E. Doubletree Ranch Road
25 Scottsdale, AZ 85258

Chris Bump
Arizona Medical Board Staff